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Substitute	e for form 1449A/PTC	)		Complete if Known		
				Application Number	N/A	
INFC	RMATION	DIS	CLOSURE	Filing Date	Herewith	
STA	TEMENT B'	Y A	PPLICANT	First Named Inventor	Wrosz	
				Group Art Unit		
	(use as many she	ets as	necessary)	Examiner Name	Unassigned	
Sheet	1	of	1	Attorney Docket Number	AT 217	

			U.S. PATENT DOCUI	MENTS	
Examiner Initials *	Cite No.1	U.S. Patent Document  Kind Code <sup>2</sup> (if known)	Name of Patentee or Applicant of Cited Document	Date of Publication of Clied Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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Examiner Signature	Hulehanh	Housen	Date Considered	2/6/06	

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Substitute for form 1449B/PTO INFORMATION DISC

Complete if Known **Application Number** 10/690,264 Filing Date October 21, 2003 First Named Inventor WROSZ, Roman **Group Art Unit** 3732 **Examiner Name** Unassigned **Attorney Docket Number** AT-000217

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**STATEMENT BY** 

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	OTHER PRIOR ART NON PATENT LITERATURE DOCUMENTS							
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